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B1 (Official Form 1)(4/10)	D0	Cumcin	ıα	gc I oi	55			
	States Bank uthern Distric		ourt				Voluntary	Petition
Name of Debtor (if individual, enter Last, First, Middle): Smiley, Gerald					ebtor (Spouse) ssandra Ro		Middle):	
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):	3 years				used by the Jo maiden, and t		n the last 8 years:	
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)  xxx-xx-3822	yer I.D. (ITIN) No./	Complete EIN	(if more	our digits of than one, state	all)	Individual-T	axpayer I.D. (ITIN) No	o./Complete EIN
Street Address of Debtor (No. and Street, City, a 126 Hancock Avenue Hamilton, OH	, 	ZIP Code <b>45011</b>	126		k Avenue	(No. and Str	eet, City, and State):	ZIP Code <b>45011</b>
County of Residence or of the Principal Place of <b>Butler</b>	f Business:	43011	Count <b>Bu</b> t	•	ence or of the	Principal Pla	ce of Business:	143011
Mailing Address of Debtor (if different from stre	eet address):	ZIP Code	Mailin	g Address	of Joint Debto	or (if differer	nt from street address):	ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):			<u>I</u>					1
Type of Debtor (Form of Organization) (Check one box)  ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	(Check  ☐ Health Care Bu ☐ Single Asset Re in 11 U.S.C. § ☐ Railroad ☐ Stockbroker ☐ Commodity Bre ☐ Clearing Bank ☐ Other  ☐ Tax-Exe	eal Estate as de 101 (51B)  oker  mpt Entity  i, if applicable)  exempt organi of the United S	zation tates	defined "incurr	the P er 7 er 9 er 11 er 12	Cetition is File Character Character Character Check Insumer debts, 101(8) as dual primarily	busine	ecognition eding ecognition
Filing Fee (Check one box  Full Filing Fee attached  Filing Fee to be paid in installments (applicable to attach signed application for the court's consideratidebtor is unable to pay fee except in installments. I Form 3A.  Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration)	individuals only). Must on certifying that the Rule 1006(b). See Offic 7 individuals only). Mu	Check if:  Debrate   Debrate    Check if:  Debrate   Debrate    Check all a  BB. According	tor is a sr tor is not tor's aggr ess than S applicable an is bein	regate nonco \$2,343,300 (as boxes: ag filed with of the plan w	debtor as defin ness debtor as d ntingent liquida amount subject this petition.	efined in 11 U ted debts (exc to adjustment		ee years thereafter).
Statistical/Administrative Information  ■ Debtor estimates that funds will be available  □ Debtor estimates that, after any exempt propthere will be no funds available for distribution that the stimated Number of Creditors	erty is excluded and	administrative	expense	es paid,		THIS	SPACE IS FOR COURT	USE ONLY
1- 50- 100- 200- 49 99 199 999 :: Estimated Assets	1,000- 5,000 10,000 10,000 10,000 10,000,001 10,000,001 10 \$10 to \$50 million million	10,001- 25 25,000 50	5,001- 0,000	50,001- 100,000	OVER 100,000			
Estimated Liabilities	\$1,000,001 \$10,000,001 to \$10 to \$50	\$50,000,001 \$10	00,000,001	\$500,000,001 to \$1 billion				

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B1 (Official Form 1)(4/10) Page 2 Name of Debtor(s): Voluntary Petition Smiley, Gerald Smiley, Cassandra Rose (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Eileen K. Field June 21, 2011 Signature of Attorney for Debtor(s) (Date) Eileen K. Field Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(4/10) Document Page 3 of 55

# **Voluntary Petition**

(This page must be completed and filed in every case)

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

# X /s/ Gerald Smiley

Signature of Debtor Gerald Smiley

### X /s/ Cassandra Rose Smiley

Signature of Joint Debtor Cassandra Rose Smiley

Telephone Number (If not represented by attorney)

June 21, 2011

Date

# Signature of Attorney\*

# X /s/ Eileen K. Field

Signature of Attorney for Debtor(s)

#### Eileen K. Field

Printed Name of Attorney for Debtor(s)

#### **Eileen Field Law Offices LLC**

Firm Name

632 Vine Street STE 1010 Cincinnati, OH 45202

Address

# Email: eileenfield.atty@fuse.net

## 513-684-9000 Fax: 513-684-8892

Telephone Number

# June 21, 2011

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 $\mathbf{X}$ 

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Smiley, Gerald

Smiley, Cassandra Rose

# Signatures

### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

## Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

 $\mathbf{X}$ 

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

# United States Bankruptcy Court Southern District of Ohio

In re	Gerald Smiley Cassandra Rose Smiley		Case No.	
		Debtor(s)	Chapter	13

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable	
statement.] [Must be accompanied by a motion for determination by the court.]	
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or	
mental deficiency so as to be incapable of realizing and making rational decisions with respect to	
financial responsibilities.);	
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of bein	ισ
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone	_
through the Internet.);	, OI
☐ Active military duty in a military combat zone.	
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling	ıg
requirement of 11 U.S.C. § 109(h) does not apply in this district.	
I certify under penalty of perjury that the information provided above is true and correct.	
Signature of Debtor: /s/ Gerald Smiley	
Gerald Smiley	
Date: June 21, 2011	

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B 1D (Official Form 1, Exhibit D) (12/09)

# United States Bankruptcy Court Southern District of Ohio

In re	Gerald Smiley Cassandra Rose Smiley		Case No.	
		Debtor(s)	Chapter	13

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
statement.] [Must be accompanied by a motion for a lineapacity. (Defined in 11 U.S.C. § mental deficiency so as to be incapable of real	Inseling briefing because of: [Check the applicable determination by the court.] § 109(h)(4) as impaired by reason of mental illness or alizing and making rational decisions with respect to
• ` `	109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Cassandra Rose Smiley Cassandra Rose Smiley
Date: June 21, 2011	

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B6 Summary (Official Form 6 - Summary) (12/07)

# **United States Bankruptcy Court** Southern District of Ohio

In re	Gerald Smiley,		Case No		
	Cassandra Rose Smiley				
_		Debtors	Chapter	13	

# SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	46,000.00		
B - Personal Property	Yes	4	179,964.28		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		127,677.54	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		24,665.27	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			4,989.18
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,600.62
Total Number of Sheets of ALL Schedu	ıles	22			
	To	otal Assets	225,964.28		
			Total Liabilities	152,342.81	

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Form 6 - Statistical Summary (12/07)

# United States Bankruptcy Court Southern District of Ohio

In re	Gerald Smiley,		Case No	
	Cassandra Rose Smiley			
_		Debtors	Chapter	13

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

#### State the following:

Average Income (from Schedule I, Line 16)	4,989.18
Average Expenses (from Schedule J, Line 18)	3,600.62
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	8,799.84

#### State the following:

State the lone wing.		
Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		63,562.54
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		24,665.27
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		88,227.81

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B6A (Official Form 6A) (12/07)

In re	Gerald Smiley,	Case No.
	Cassandra Rose Smilev	

Debtors

#### SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Current Value of Husband, Debtor's Interest in Wife, Joint, or Nature of Debtor's Amount of Description and Location of Property Property, without Interest in Property Secured Claim Deducting any Secured Community Claim or Exemption Residence- 126 Hancock Avenue, Hamilton, Ohio, Debtors are joint owners 46,000.00 99,821.70 45011

Sub-Total > 46,000.00 (Total of this page)

Total > 46,000.00

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B6B (Official Form 6B) (12/07)

In re	Gerald Smiley,	Case No.
	Cassandra Rose Smiley	

Debtors

# SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash on Hand	-	50.00
2.	Checking, savings or other financial	Checking Account- Aurgroup Credit Union	J	6.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and	Savings Account- Aurgroup Credit Union	J	5.00
	homestead associations, or credit unions, brokerage houses, or cooperatives.	Savings Account: Sharefax Credit Union	н	5.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household Goods and Furnishings- couch, chair, bedroom set, love seat, dining room table/chairs, stove, refrigerator, diswasher, 4 tv's, 3 dvd players, twin bed, crib, 2 dressers, laptop computer, washer, dryer	-	2,500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Clothing	J	400.00
7.	Furs and jewelry.	Jewelry- Wedding Rings, Costume	-	200.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies.	Life Insuance: Through Employment	W	0.00
	Name insurance company of each policy and itemize surrender or refund value of each.	Life Insurance: Western Southern Life Insurance (3)	J	300.00
10.	Annuities. Itemize and name each issuer.	X		

Sub-Total > 3,466.00 (Total of this page)

<sup>3</sup> continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

In re	Gerald Smiley,	
	Cassandra Rose Smiley	

# Debtors

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		eferred Compensation Plan- County ommisioner's Association	Н	6,990.26
	plans. Give particulars.	IR	A- Primerica	Н	0.00
		0	PERS	н	151,393.02
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			

Sub-Total > (Total of this page)

158,383.28

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

In re	Gerald Smiley,	Case No.
	Cassandra Rose Smiley	

# Debtors

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and	Т	ruck- 2004 Chevrolet Silverado, 82,000 miles	J	11,325.00
	other vehicles and accessories.	A	Automobile- 2006 Town & Country Minivan	J	6,790.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

18,115.00

Sub-Total >

(Total of this page)

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

In re	Gerald Smiley,	Case	No	
	Cassandra Rose Smiley			
		Debtors		
	SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)			
		N	Husband,	Current Value of

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
------------------	------------------	--------------------------------------	---	---

35. Other personal property of any kind not already listed. Itemize.

Sub-Total > (Total of this page)

Total >

179,964.28

0.00

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B6C (Official Form 6C) (4/10)

In re	Gerald Smiley,	
	Cassandra Rose Smiley	

Debtors

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled (Check one box)  11 U.S.C. §522(b)(2)  11 U.S.C. §522(b)(3)	\$146,450. (Amount st	ubject to adjustment on 4/1	mption that exceeds /13, and every three years thereaf, or after the date of adjustment.)
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property Residence- 126 Hancock Avenue, Hamilton, Ohio, 45011	Ohio Rev. Code Ann. § 2329.66(A)(1)	21,625.00	46,000.00
<u>Cash on Hand</u> Cash on Hand	Ohio Rev. Code Ann. § 2329.66(A)(3)	50.00	50.00
Checking, Savings, or Other Financial Accounts, Checking Account- Aurgroup Credit Union	Certificates of Deposit Ohio Rev. Code Ann. § 2329.66(A)(3)	6.00	6.00
Savings Account- Aurgroup Credit Union	Ohio Rev. Code Ann. § 2329.66(A)(3)	5.00	5.00
Savings Account: Sharefax Credit Union	Ohio Rev. Code Ann. § 2329.66(A)(3)	5.00	5.00
Household Goods and Furnishings Household Goods and Furnishings- couch, chair, bedroom set, love seat, dining room table/chairs, stove, refrigerator, diswasher, 4 tv's, 3 dvd players, twin bed, crib, 2 dressers, laptop computer, washer, dryer	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	2,500.00	2,500.00
Wearing Apparel Clothing	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	400.00	400.00
<u>Furs and Jewelry</u> Jewelry- Wedding Rings, Costume	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	200.00	200.00
Interests in Insurance Policies			
Life Insuance: Through Employment	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(b), 3911.10, 3911.12, 3911.14	100%	0.00
Life Insurance: Western Southern Life Insurance (3)	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(b), 3911.10, 3911.12, 3911.14	100%	300.00
Interests in IRA, ERISA, Keogh, or Other Pension Deferred Compensation Plan- County Commissioner's Association	or Profit Sharing Plans Ohio Rev. Code Ann. §§ 2329.66(A)(10)(a), 521.09, 145.56, 145.75, 145.13, 742.47, 3307.71	100%	6,990.26
OPERS	Ohio Rev. Code Ann. §§ 2329.66(A)(10)(a), 521.09, 145.56, 145.75, 145.13, 742.47, 3307.71	100%	151,393.02
Automobiles, Trucks, Trailers, and Other Vehicles Truck- 2004 Chevrolet Silverado, 82,000 miles	Ohio Rev. Code Ann. § 2329.66(A)(2)	3,450.00	11,325.00
Automobile- 2006 Town & Country Minivan	Ohio Rev. Code Ann. § 2329.66(A)(2)	0.00	6,790.00
	Totals	196 024 29	225.064.29

**<sup>0</sup>** continuation sheets attached to Schedule of Property Claimed as Exempt

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B6D (Official Form 6D) (12/07)

In re	Gerald Smiley,	
	Cassandra Rose Smiley	

Debtors

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	ローCDーロ	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. <b>7292</b> Car Connection Inc. 4425 Dixie Hwy. Fairfield, OH 45014		J	Lien Dated 9/28/09  Automobile- 2006 Town & Country Minivan	Ť	A T E D			
	_		Value \$ 6,790.00	_			11,018.75	4,228.75
Account No.  Nancy Nix, CPA, Treasurer Butler County 315 High St., 10th Floor Hamilton, OH 45011		J	Residence- 126 Hancock Avenue, Hamilton, Ohio, 45011					
Account No. <b>6763</b>	+	+	Value \$ 46,000.00 01-04-2007		Н		1,661.37	1,661.37
Nuvell PO Box 380902 Minneapolis, MN 55438		J	Lien Dated 1/4/07  Truck- 2004 Chevrolet Silverado, 82,000 miles					
Account No.	+	+	Value \$ 11,325.00	_	Н		16,837.09	5,512.09
Nuvell PO Box 9001951 Louisville, KY 40290			Representing: Nuvell				Notice Only	
1 continuation sheets attached         Value \$         Subtotal (Total of this page)         29,517.21         11,402.21								

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 $B6D\ (Official\ Form\ 6D)\ (12/07)$  - Cont.

In re	Gerald Smiley,		Case No	
_	Cassandra Rose Smiley		_;	
		Debtors		

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	A H	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN	CONFINGEN	I D	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 7691	T	T	2nd Mortgage Filed 9/28/06	٦,	A T E D			
Vericrest Financial PO Box 24610 Oklahoma City, OK 73124-0610		J	Residence- 126 Hancock Avenue, Hamilton, Ohio, 45011		D			
			Value \$ 46,000.00				19,893.54	19,893.54
Account No.		T	First Mortgage Filed 9/28/06					
Vericrest Financial PO Box 24610 Oklahoma City, OK 73124-0610		J	Residence- 126 Hancock Avenue, Hamilton, Ohio, 45011					
			W. I	4				
Account No.	╀	+	Value \$ 46,000.00	+	H	$\vdash$	78,266.79	32,266.79
			Value \$					
Account No.								
			Value \$					
Account No.	t	T		T				
			Value \$					
Sheet 1 of 1 continuation sheets atta		ed to	(Total of t	Sub			98,160.33	52,160.33
Schedule of Creditors Holding Secured Claim	S		(Total of t			ŀ		
			(Report on Summary of So		ota lule		127,677.54	63,562.54

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B6E (Official Form 6E) (4/10)

In re	Gerald Smiley,	Case No
	Cassandra Rose Smiley	
-		Debtors
	SCHEDULE E - CREDITORS HO	LDING UNSECURED PRIORITY CLAIMS
to pricaccour contin Tso. If a Do no It scheduliable colum "Dispu "Total R"Total also or R priorit total a	ority should be listed in this schedule. In the boxes provided on the ant number, if any, of all entities holding priority claims against the quation sheet for each type of priority and label each with the type of the complete account number of any account the debtor has with the aminor child is a creditor, state the child's initials and the name and it disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. of any entity other than a spouse in a joint case may be jointly liable ule of creditors, and complete Schedule H-Codebtors. If a joint petition each claim by placing an "H," "W," "J," or "C" in the column lain labeled "Contingent." If the claim is unliquidated, place an "X" in uted." (You may need to place an "X" in more than one of these threeport the total of claims listed on each sheet in the box labeled "Su" on the last sheet of the completed schedule. Report this total also the total of amounts entitled to priority listed on each sheet in the Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. The case of the control of the last sheet of the completed schedule. The case of the control of the last sheet of the control of the last sheet of the completed schedule. The case of the control of the case of the control of the last sheet of the	the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do d address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." P. 1007(m).  on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate tion is filed, state whether the husband, wife, both of them, or the marital community may be abeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the nother column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled recolumns.)  abtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled on the Summary of Schedules.  In the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority the completed schedule. Individual debtors with primarily consumer debts report this total set in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to theet of the completed schedule. Individual debtors with primarily consumer debts report this atta.
TYP	ES OF PRIORITY CLAIMS (Check the appropriate box(es)	below if claims in that category are listed on the attached sheets)
■ De	omestic support obligations	
		use, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
□ E <sub>2</sub>	xtensions of credit in an involuntary case	
	aims arising in the ordinary course of the debtor's business or finance or the order for relief. 11 U.S.C. § 507(a)(3).	icial affairs after the commencement of the case but before the earlier of the appointment of a
$\square$ W	ages, salaries, and commissions	
repres		I sick leave pay owing to employees and commissions owing to qualifying independent sales liately preceding the filing of the original petition, or the cessation of business, whichever

☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business,

# ☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,775\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

#### ☐ Deposits by individuals

Claims of individuals up to \$2,600\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

#### ☐ Taxes and certain other debts owed to governmental units

whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

#### ☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

#### ☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/10) - Cont.

In re	Gerald Smiley,		Case No.	
	Cassandra Rose Smiley		·	
-		Dobtors	,	

# SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

#### **Domestic Support Obligations**

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, NLIQUIDATED ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) **Child Support-Current** Account No. **Tina Mack** 0.00 604 Ridgelawn Ave. Hamilton, OH 45013 J 0.00 0.00 Account No. **Butler County CSEA** Representing: 315 High Street **Tina Mack Notice Only** 7th Floor Hamilton, OH 45011 Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 0.00 0.00 0.00

(Report on Summary of Schedules)

0.00

0.00

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B6F (Official Form 6F) (12/07)

In re	Gerald Smiley, Cassandra Rose Smiley		Case No.	
		Debtors	-,	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Check this box if debtor has no creditors holding unsecure	ea c	ıaın	ns to report on this Schedule F.					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	Z Q D _	DISPUTED	3	AMOUNT OF CLAIM
Account No.			2010 Loans	Ť	T E D			
AurGroup Credit Union 8811 Holden Blvd. Fairfield, OH 45014		J						1,217.09
Account No.			2 Loans		П	T	Ť	
Cash Yes 508 Marinated Towers, Newton Barack Rd. NAC: 7MGPK KWNVT Belize City		J						900.00
Account No.					П	T	T	
Cash Yes PO Box 96503 #15050 Washington, DC 20090			Representing: Cash Yes					Notice Only
Account No. 3677			2011		П	T	T	
Cashnetusa.com 200 W. Jackson Blvd., 4th Floor Chicago, IL 60606-6941		-	Cash Advance Loans					464.73
5 continuation sheets attached (Total of this page)					2,581.82			

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B6F (Official Form 6F) (12/07) - Cont.

In re	Gerald Smiley,	Case No.
	Cassandra Rose Smiley	

# Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

				<del></del>			_	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community		č	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		CONTINGENT	UZL_QU_DAFED	SPUTED	AMOUNT OF CLAIM
Account No.			Overdrafts		Т	T E		
Chaco Credit Union 601 Park Avenue Hamilton, OH 45013		J				D		595.00
Account No.			Loan	$\Box$	$\neg$			
Check Into Cash PO Box 550 Cleveland, TN 37364		J						279.00
Account No.	-	_	2007	$\dashv$	4			
Cingular Wireless PO Box 17252 Baltimore, MD 21297		-	Cell Phone bill					1,100.00
Account No. 1613  Credit One Bank PO Box 60500 City Of Industry, CA 91716-0500		-	2007 Credit Card					1,189.34
Account No.	╁	$\vdash$		$\dashv$	$\dashv$		_	.,
LVNV Funding PO Box 10584 Greenville, SC 29603			Representing: Credit One Bank					Notice Only
Sheet no. 1 of 5 sheets attached to Schedule of	f	•	•	Sι	ıbt	ota	1	2.462.24
Creditors Holding Unsecured Nonpriority Claims			(Total o	of th	is t	pag	e)	3,163.34

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B6F (Official Form 6F) (12/07) - Cont.

In re	Gerald Smiley,	Case No.
	Cassandra Rose Smiley	

# Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	_							
CREDITOR'S NAME,	C	Нι	usband, Wife, Joint, or Community	С	U	D		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	OD E B T O R	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN		D I S P U T E D		AMOUNT OF CLAIM
Account No.				T	E D			
Nationwide Credit Inc 2015 Vaughn Rd NW STE40 Kennesaw, GA 30144-7802			Representing: Credit One Bank		D			Notice Only
Account No. 7079			2009	$\top$	Т	T	T	
CVS/ Caremark PO Box 659539 San Antonio, TX 78265		-	Mail Order Charges					120.00
Account No. 2989			2009					
Evendale Medical Center 225 Pictoria Drive Cincinnati, OH 45246		-	Medical Services					358.40
Account No.		T		T	T	t	T	
Credit Clearing House of America Inc. PO Box 1209 Louisville, KY 40201-1209			Representing: Evendale Medical Center					Notice Only
Account No. 2638			2007	$\dagger$	T	T	Ť	
HSBC Card Services Inquiries PO Box 81622 Salinas, CA 93912-0084		-	Credit Card					930.84
Sheet no. 2 of 5 sheets attached to Schedule of				Sub	tota	ıl		4 400 6 4
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pas	ge)	П	1,409.24

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B6F (Official Form 6F) (12/07) - Cont.

In re	Gerald Smiley,	Case No.
	Cassandra Rose Smiley	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	_				_	_	_	
CREDITOR'S NAME,	Š	Ηι	usband, Wife, Joint, or Community	ļç	U	1		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	OD E B T O R	C A M	CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGEN	I Q			AMOUNT OF CLAIM
Account No.				Т	E	ı	-	
Arrow Financial Services 726 Exchange Street Suite 700 Buffalo, NY 14210			Representing: HSBC Card Services		D			Notice Only
Account No.		T		$\top$	T	Ť	1	
Capital Management Services 726 Excahnge St STE 700 Buffalo, NY 14210			Representing: HSBC Card Services					Notice Only
Account No.				T				
HSBC Card Services PO Box 80084 Salinas, CA 93912-0084			Representing: HSBC Card Services					Notice Only
Account No. 0323			2010	Т	T	T		
Liberty Mutual 5939 Deerfield Blvd. Mason, OH 45040		-	Insurance Premiums					277.36
Account No. 5831		T	2007	T	T	T	$\dashv$	
Premier Bankcard, Inc. PO Box 5147 Sioux Falls, SD 57117		-	Credit Card					595.92
Sheet no. 3 of 5 sheets attached to Schedule of				Sub	tota	al	$\dashv$	070.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	this	pas	ge	М	873.28

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B6F (Official Form 6F) (12/07) - Cont.

In re	Gerald Smiley,	Case No
	Cassandra Rose Smiley	

# Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

					_		
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	P	
MAILING ADDRESS	CODEBTOR	Н	DATE CLAIM WAS INCURRED AND	C O N T	Ļ	D I S P	
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLAIM	11	Q	Ü	AMOUNT OF CLAIM
AND ACCOUNT NUMBER (See instructions above.)	o	C	IS SUBJECT TO SETOFF, SO STATE.	G		ΙE	AMOUNT OF CLAIM
· · · · · · · · · · · · · · · · · · ·	R	Ĺ		N G E N	D A T	D	
Account No.				T	E		
				$\vdash$	Ь	┝	
NCO Financial Systems			Representing:				
507 Prudential Rd.			Premier Bankcard, Inc.				Notice Only
Horsham, PA 19044							
Account No.			Loan				
	1						
Seaside Trust		١.					
1130 Front Blvd.		J					
Suite 204							
Seaside, CA 93955							
							400.00
Account No.	T		Cell Phone-Current	T		T	
	1						
Sprint							
PO Box 660075		J					
Dallas, TX 75266-0075							
							0.00
Account No.	┢		2007	${\dagger}$		H	
	1		Account				
T-Mobile							
PO Box 742596		J					
Cincinnati, OH 45274-2596							
							200.00
Account No.	╁	$\vdash$	2007	$\vdash$		$\vdash$	
Account No.	1		Cable			1	
Time Warner Cable	1					1	
Time Warner Cable PO Box 740201	l	J					
	1					1	
Cincinnati, OH 45274-0201						1	
	l						222.55
				L			200.00
Sheet no4 of _5 sheets attached to Schedule of			2	Subt	ota	ıl	800.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	000.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Gerald Smiley,	Case No.
	Cassandra Rose Smiley	

# Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	1 -	_		-		-	1
CREDITOR'S NAME,	0	Hu	sband, Wife, Joint, or Community	0	N	l D	
MAILING ADDRESS INCLUDING ZIP CODE,	CODEBTOR	H W	DATE CLAIM WAS INCURRED AND	CONTI	ŀ	S P	
AND ACCOUNT NUMBER	B	J	CONSIDERATION FOR CLAIM. IF CLAIM	N N	Q	Ţ	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	NGEN	Þ	DISPUTED	
Account No. 0715	┢	┢	2010	T	D A T		
	1		Cell Phone		Ë		
Verizon Wireless							]
700 Cranberry Woods Dr.		-					
Cranberry Twp, PA 16066							
							650.00
Account No.		T				T	
	1						
Verizon Wireless			Representing:				
PO Box 4002			Verizon Wireless				Notice Only
Acworth, GA 30101							
Account No. 9001			2008				
	1		Repossessed Vehicle Deficiency: 2006 Toyota				
Wells Fargo			Camry				
Asset Recovery Group		-					
1460 Northwest Vivion Road							
Kansas City, MO 64118							
							15,187.59
Account No.							
	1						
Account No.							
		<u></u>		<u> </u>		<u></u>	
Sheet no. <b>5</b> of <b>5</b> sheets attached to Schedule of				ubt			15,837.59
Creditors Holding Unsecured Nonpriority Claims			(Total of the	nis j	pag	ge)	
				T	ota	ıl	
			(Report on Summary of Sc	hed	lule	es)	24,665.27

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B6G (Official Form 6G) (12/07)

In re	Gerald Smiley,	Case No.
	Cassandra Rose Smilev	

Debtors

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Sprint PO Box 660075 Dallas, TX 75266-0075 Debtors will assume the lease.

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B6H (Official Form 6H) (12/07)

In re	Gerald Smiley,	Case No.
	Cassandra Rose Smilev	

Debtors

# **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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**B6I (Official Form 6I) (12/07)** 

_	Gerald Smiley			
In re	Cassandra Rose Smiley		Case No.	
		Debtor(s)	_	

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS	OF DEBTOR AND S	SPOUSE		
Married	RELATIONSHIP(S): Daughter Daughter Daughter Daughter	AGE(S) 16 2 7	6		
<b>Employment:</b>	DEBTOR		SPOUSE		
	aste Water Operator	Pharmacy R	eimbursements		
Name of Employer Bu	utler County Dept. of Environmental Sr	Humana One			
How long employed 17	7 years	10/10			
Ha	30 High St. amilton, OH 45011	PO Box 7405 Atlanta, GA			
INCOME: (Estimate of average or pro	ojected monthly income at time case filed)		DEBTOR	_	SPOUSE
	ommissions (Prorate if not paid monthly)	\$_	5,253.86	\$	3,059.29
2. Estimate monthly overtime		\$_	0.00	\$	0.00
3. SUBTOTAL		\$_	5,253.86	\$_	3,059.29
4. LESS PAYROLL DEDUCTIONS					
<ul> <li>a. Payroll taxes and social securit</li> </ul>	ty	\$_	587.41	\$_	697.49
b. Insurance		\$_	716.76	\$	271.92
c. Union dues		\$	40.58	\$	0.00
d. Other (Specify) See Do	etailed Income Attachment		1,009.81	\$_	0.00
5. SUBTOTAL OF PAYROLL DEDU	UCTIONS	\$_	2,354.56	\$_	969.41
6. TOTAL NET MONTHLY TAKE H	OME PAY	\$_	2,899.30	\$_	2,089.88
7. Regular income from operation of b	ousiness or profession or farm (Attach detailed stat		0.00	\$	0.00
8. Income from real property		\$	0.00	\$	0.00
9. Interest and dividends		\$	0.00	\$	0.00
dependents listed above	payments payable to the debtor for the debtor's use	e or that of	0.00	\$	0.00
11. Social security or government assis	stance	¢	0.00	¢.	0.00
(Specify):		\$	0.00	, _ ,	0.00
10 Ditiromont in come				\$ <u></u>	0.00
12. Pension or retirement income		\$ _	0.00	» _	0.00
13. Other monthly income		¢	0.00	¢.	0.00
(Specify):		\$	0.00	ф —	0.00
			0.00	<sub>2</sub> —	0.00
					0.00
14. SUBTOTAL OF LINES 7 THROU	JGH 13	\$_	0.00	\$	0.00
	JGH 13 E (Add amounts shown on lines 6 and 14)	\$ <u>.</u> \$ <u>.</u>	2,899.30	\$_ \$_	2,089.88

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

NA

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**B6I (Official Form 6I) (12/07)** 

In re	Gerald Smiley Cassandra Rose Smiley		Case No.	
		Debtor(s)	•	

# $\frac{SCHEDULE\ I-CURRENT\ INCOME\ OF\ INDIVIDUAL\ DEBTOR(S)}{Detailed\ Income\ Attachment}$

# Other Payroll Deductions:

Child Support	\$ 334.43	\$ 0.00
YMCA	\$ 69.81	\$ 0.00
DC Galic	\$ 54.17	\$ 0.00
PERS	\$ 525.40	\$ 0.00
DC CCAO	\$ 26.00	\$ 0.00
<b>Total Other Payroll Deductions</b>	\$ 1,009.81	\$ 0.00

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B6J (Official Form 6J) (12/07)

In re	Gerald Smiley  1 re Cassandra Rose Smiley		Case No.	
		Debtor(s)		

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

expenses calculated on this form may differ from the deductions from income allowed or	n Form 22A or 22C.
Check this box if a joint petition is filed and debtor's spouse maintains a separate horizontal content of the	ousehold. Complete a separate schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$0.00
a. Are real estate taxes included? Yes No	
b. Is property insurance included? Yes No	
2. Utilities: a. Electricity and heating fuel	\$
b. Water and sewer	\$65.00
c. Telephone	\$160.00
d. Other <b>Cable</b>	\$ 100.00
3. Home maintenance (repairs and upkeep)	\$
4. Food	\$800.00
5. Clothing	\$ 150.00
6. Laundry and dry cleaning	\$ 40.00
7. Medical and dental expenses	\$ 20.00
8. Transportation (not including car payments)	\$ 674.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ 50.00
10. Charitable contributions	\$
11. Insurance (not deducted from wages or included in home mortgage payments)	<b>ADE 00</b>
a. Homeowner's or renter's	\$ 125.00
b. Life	\$ 0.00
c. Health	\$ 0.00
d. Auto	\$ 125.00
e. Other	\$
12. Taxes (not deducted from wages or included in home mortgage payments)  (Specify) Real Estate Taxes	\$ 71.62
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be in	ncluded in the
plan) a. Auto	\$ 0.00
	<u> </u>
b. Other c. Other	\$ 0.00
	\$ 0.00
<ul><li>14. Alimony, maintenance, and support paid to others</li><li>15. Payments for support of additional dependents not living at your home</li></ul>	\$ 0.00 \$ 0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed st	·
17. Other See Detailed Expense Attachment	\$ 0.00 \$ 980.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	f Schedules and, \$ 3,600.62
19. Describe any increase or decrease in expenditures reasonably anticipated to occur v	vithin the year
following the filing of this document:	die jeu
NA	
20. STATEMENT OF MONTHLY NET INCOME	
a. Average monthly income from Line 15 of Schedule I	\$ 4,989.18
b. Average monthly expenses from Line 18 above	\$ 3,600.62
c. Monthly net income (a. minus b.)	\$ 3,666.62 \$ 1,388.56
	Ψ

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B6J (Official Form 6J) (12/07) Gerald Smiley

In re	Cassandra Rose Smiley	Case No.	

Debtor(s)

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

# **Detailed Expense Attachment**

# **Other Expenditures:**

day care	\$ 500.00
personal hygiene, diapers	\$ 130.00
hair care	\$ 150.00
cleaning supplies	\$ 50.00
automobile maintenance	\$ 150.00
Total Other Expenditures	\$ 980.00

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B6 Declaration (Official Form 6 - Declaration). (12/07)

# **United States Bankruptcy Court** Southern District of Ohio

In re	Cassandra Rose Smiley		Case No.	
		Debtor(s)	Chapter	13

# DECLARATION CONCERNING DEBTOR'S SCHEDULES

# DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of perjury the sheets, and that they are true and correct to the		ad the foregoing summary and schedules, consisting of
Date	June 21, 2011	Signature	/s/ Gerald Smiley Gerald Smiley Debtor
Date	June 21, 2011	Signature	/s/ Cassandra Rose Smiley Cassandra Rose Smiley Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/10)

# **United States Bankruptcy Court Southern District of Ohio**

In re	Gerald Smiley Cassandra Rose Smiley		Case No.		
		Debtor(s)	Chapter	13	

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Ouestions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None 

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT <b>\$84,220.00</b>	SOURCE 2009-Employment-Joint
\$92,584.00	2010-Employment-Joint
\$20,502.26	2011-Employment-Husband-Butler County, Ohio
\$11,777.44	2011-Employment-Wife-Humana

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

**SOURCE** 

#### 3. Payments to creditors

None

#### Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts*. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Mortage & Vehicle Payments DATES OF PAYMENTS Debtors pay their mortage and vehicle payments monthly.

AMOUNT PAID **\$0.00** 

AMOUNT STILL OWING \$0.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

## 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER Car Connection Inc. 4425 Dixie Hwv.

Fairfield, OH 45014

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN 6/19/11

DESCRIPTION AND VALUE OF PROPERTY

Automobile- 2006 Town & Country Minivan \$6,790.00

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or** since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

# 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

# 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

DATES OF OCCUPANCY ADDRESS NAME USED

### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

**NAME** 

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

6

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

**BEGINNING AND** 

**ENDING DATES** 

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

ADDRESS NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME **ADDRESS** DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

**ADDRESS** NAME

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

### 20. Inventories

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

None

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

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### 21 . Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

7

### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

#### NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	June 21, 2011	Signature	/s/ Gerald Smiley	
			Gerald Smiley	
			Debtor	
Date	June 21, 2011	Signature	/s/ Cassandra Rose Smiley	
			Cassandra Rose Smiley	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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## **LBR Form 2016-1(b)**

## UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re:		Case No.
Gerald Smiley		
Cassandra Rose Smiley		Chapter 13
	Debtor(s)	Judge

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND ADDITECTION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

#### I.

	AND ALL LICATION FOR ALLOWANCE OF	TEES IN CITAL I	EK 13 CASE
I.	Disclosure		
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that compensation paid to me within one year before the filing of the pservices rendered or to be rendered on behalf of the debtor(s) in contemp follows:	petition in bankruptcy,	or agreed to be paid to me, for
	For legal services, I have agreed to accept	\$	3,500.00
	Prior to the filing of this statement I have received	s	500.00
	Balance Due	\$	3,000.00
2.	\$ of the filing fee has been paid.		
3.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
4.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
5.	■ I have not agreed to share the above-disclosed compensation with any associates of my law firm.	other persons unless th	ey are members and/or
	☐ I have agreed to share the above-disclosed compensation with another of my law firm. A copy of the agreement, together with a list of the na attached.		

### **Application**

- I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,500, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,500, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the hourly rate at which the services were performed, and the actual time spent by the case attorney, any other attorney, paralegal or professional person for whom fees are sought. Any request for reimbursement of expenses shall include an itemization of the expenses.
  - Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what a. chapter, to file a petition in bankruptcy;
  - Preparation and filing of any petition, schedules, statement of affairs and amendments thereto that may be required; b.
  - Preparation and filing of chapter 13 plan, and any pre-confirmation amendments thereto that may be required; c.
  - Preparation and filing of payroll orders and amended payroll orders; d.
  - e. Representation of the debtor at the meeting of creditors and confirmation hearing; and any continued hearings thereof;
  - f. Filing of address changes;
  - Routine phone calls and questions; g.
  - Review of claims; h.

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- i. Review of notice of intention to pay claims;
- j. Preparation and filing of objections to non-real estate and non-tax claims;
- k. Preparation and filing of first motion to suspend or reduce payments;
- 1. Preparation and filing of debtor's certification regarding issuance of discharge order; and
- m. Any other duty as required by local decision or policy.

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

June 21, 2011	/s/ Eileen K. Fiel
---------------	--------------------

Date

Eileen K. Field

Signature of Attorney

Eileen Field Law Offices LLC 632 Vine Street STE 1010 Cincinnati, OH 45202 513-684-9000 Fax: 513-684-8892 eileenfield.atty@fuse.net B 201A (Form 201A) (12/09)

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

## Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

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B 201B (Form 201B) (12/09)

## **United States Bankruptcy Court** Southern District of Ohio

In re	Gerald Smiley Cassandra Rose Smiley		Case No.			
		Debtor(s)	Chapter	13		
	CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE					
Code.	Certif I (We), the debtor(s), affirm that I (we) have receive	ication of Debtor d and read the attached	notice, as required	by § 342(b) of the Bankruptcy		

Gerald Smiley
Cassandra Rose Smiley

Printed Name(s) of Debtor(s)

Case No. (if known)

X /s/ Gerald Smiley
Signature of Debtor

X /s/ Cassandra Rose Smiley
Signature of Joint Debtor (if any)
Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Arrow Financial Services 726 Exchange Street Suite 700 Buffalo, NY 14210

AurGroup Credit Union 8811 Holden Blvd. Fairfield, OH 45014

Butler County CSEA 315 High Street 7th Floor Hamilton, OH 45011

Capital Management Services 726 Excahnge St STE 700 Buffalo, NY 14210

Car Connection Inc. 4425 Dixie Hwy. Fairfield, OH 45014

Cash Yes 508 Marinated Towers, Newton Barack Rd. NAC: 7MGPK KWNVT Belize City

Cash Yes PO Box 96503 #15050 Washington, DC 20090

Cashnetusa.com 200 W. Jackson Blvd., 4th Floor Chicago, IL 60606-6941

Chaco Credit Union 601 Park Avenue Hamilton, OH 45013

Check Into Cash PO Box 550 Cleveland, TN 37364

Cingular Wireless PO Box 17252 Baltimore, MD 21297

Credit Clearing House of America Inc. PO Box 1209
Louisville, KY 40201-1209

Credit One Bank PO Box 60500 City Of Industry, CA 91716-0500 CVS/ Caremark PO Box 659539 San Antonio, TX 78265

Evendale Medical Center 225 Pictoria Drive Cincinnati, OH 45246

HSBC Card Services Inquiries PO Box 81622 Salinas, CA 93912-0084

HSBC Card Services PO Box 80084 Salinas, CA 93912-0084

Liberty Mutual 5939 Deerfield Blvd. Mason, OH 45040

LVNV Funding PO Box 10584 Greenville, SC 29603

Nancy Nix, CPA, Treasurer Butler County 315 High St., 10th Floor Hamilton, OH 45011

Nationwide Credit Inc 2015 Vaughn Rd NW STE40 Kennesaw, GA 30144-7802

NCO Financial Systems 507 Prudential Rd. Horsham, PA 19044

Nuvell PO Box 380902 Minneapolis, MN 55438

Nuvell PO Box 9001951 Louisville, KY 40290

Premier Bankcard, Inc. PO Box 5147 Sioux Falls, SD 57117

Seaside Trust 1130 Front Blvd. Suite 204 Seaside, CA 93955 Sprint PO Box 660075 Dallas, TX 75266-0075

T-Mobile PO Box 742596 Cincinnati, OH 45274-2596

Time Warner Cable PO Box 740201 Cincinnati, OH 45274-0201

Tina Mack 604 Ridgelawn Ave. Hamilton, OH 45013

Vericrest Financial PO Box 24610 Oklahoma City, OK 73124-0610

Verizon Wireless 700 Cranberry Woods Dr. Cranberry Twp, PA 16066

Verizon Wireless PO Box 4002 Acworth, GA 30101

Wells Fargo Asset Recovery Group 1460 Northwest Vivion Road Kansas City, MO 64118

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B22C (Official Form 22C) (Chapter 13) (12/10)

	Gerald Smiley	According to the calculations required by this statement:
In re	Cassandra Rose Smiley	☐ The applicable commitment period is 3 years.
C N	Debtor(s)	■ The applicable commitment period is 5 years.
Case N	(If known)	■ Disposable income is determined under § 1325(b)(3).
	(II Khowii)	☐ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

## CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Par	t I.	REPORT OF INC	COM	1E				
1		Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.  a.   Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.								
		Married. Complete both Column A ("Debto					me'')	for Lines 2-10		
	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.							Column A  Debtor's Income		Column B Spouse's Income
2	Gros	s wages, salary, tips, bonuses, overtime, con	nmi	ssions.			\$	5,579.52	\$	3,220.32
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.									
	a.	Gross receipts	\$	Debtor 0.00	\$	Spouse 0.00				
	b.	Ordinary and necessary business expenses	\$		\$	0.00				
	c.	Business income	Su	btract Line b from	Line	a	\$	0.00	\$	0.00
4	the appart	s and other real property income. Subtract p	a nu as	mber less than zero a deduction in Par Debtor 0.00	o. D t IV	o not include any '.  Spouse  0.00				
	b.	Ordinary and necessary operating expenses  Rent and other real property income	\$	<b>0.00</b> abtract Line b from		0.00	\$	0.00	¢	0.00
~			SI	ibtract Line b from	LIII	e a	<u> </u>			
5	Inter	est, dividends, and royalties.					\$	0.00	\$	0.00
6	Pension and retirement income.				\$	0.00	\$	0.00		
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.					\$	0.00	\$	0.00	
8	Howe benef or B,	nployment compensation. Enter the amount is ever, if you contend that unemployment competit under the Social Security Act, do not list the but instead state the amount in the space below mployment compensation claimed to	ensa e an	ation received by ye	ou oi	r your spouse was a				
		benefit under the Social Security Act Debtor	r \$	<b>0.00</b> Sp	ouse	\$ 0.00	\$	0.00	\$	0.00

9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.		
	Debtor Spouse		
	a.	0.00	\$ 0.00
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).  5,5	79.52	\$ 3,220.32
11	<b>Total.</b> If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.		8,799.84
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD		
12	Enter the amount from Line 11	\$	8,799.84
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spou enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis fo the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustmen on a separate page. If the conditions for entering this adjustment do not apply, enter zero.  a. \$ b. \$ c. \$ \$ C. \$	r the	
	Total and enter on Line 13	\$	0.00
14	Subtract Line 13 from Line 12 and enter the result.	\$	8,799.84
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 a enter the result.	nd \$	105,598.08
16	Applicable median family income. Enter the median family income for applicable state and household size. (Tinformation is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	his	
	a. Enter debtor's state of residence: OH b. Enter debtor's household size: 5	\$	80,125.00
17	<ul> <li>Application of § 1325(b)(4). Check the applicable box and proceed as directed.</li> <li>□ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitme top of page 1 of this statement and continue with this statement.</li> <li>■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commit at the top of page 1 of this statement and continue with this statement.</li> </ul>	-	·
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOMI	<u>C</u>	
18	Enter the amount from Line 11.	\$	8,799.84
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.    A	;	
	c. \$		
	Total and enter on Line 19.	\$	0.00
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$	8,799.84

21		alized current monthly income result.	ome for § 1325(b)(3). N	Multip	ply the a	mount from Line 2	0 by the number 12 and	\$	105,598.08
22	A Palla and the Carle town For the Art of th							\$	80,125.00
23	■ The	e amount on Line 21 is mo 25(b)(3)" at the top of page	re than the amount on	Line	<b>22.</b> Ch	eck the box for "Di		ined u	ınder §
		e amount on Line 21 is not 25(b)(3)" at the top of page							
		Part IV. Ca	ALCULATION (	OF I	DEDU	CTIONS FR	OM INCOME		
		Subpart A: D	eductions under Star	ndar	ds of tl	ne Internal Reve	nue Service (IRS)		
24A	Enter i applica bankru	nal Standards: food, appar in Line 24A the "Total" ame able number of persons. (T aptcy court.) The applicable ir federal income tax return	ount from IRS National his information is availa number of persons is the	Standable and the standard sta	lards for t www.u nber tha	: Allowable Living usdoj.gov/ust/ or fro t would currently b	Expenses for the om the clerk of the e allowed as exemptions	\$	1,639.00
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.								
	Perso	ons under 65 years of age		Pers	sons 65	years of age or old	ler		
	a1.	Allowance per person	60	a2.	Allow	ance per person	144		
	b1.	Number of persons	5	b2.	Numb	er of persons	0		
	c1.	Subtotal	300.00	c2.	Subto	tal	0.00	\$	300.00
25A	Utilitie availab the nui	Standards: housing and uses Standards; non-mortgage ole at www.usdoj.gov/ust/ omber that would currently buditional dependents whom	expenses for the applic or from the clerk of the be allowed as exemption	able o ankrı	county a optcy co	nd family size. (Thurt). The applicable	nis information is e family size consists of	\$	567.00
25B	Housing available the number any addebts so	Standards: housing and ung and Utilities Standards; able at www.usdoj.gov/ust/omber that would currently be ditional dependents whom secured by your home, as ster an amount less than zero.	mortgage/rent expense for from the clerk of the book allowed as exemption you support); enter on Lated in Line 47; subtractero.	or you oankru s on y Line b t Line	our count optcy co your fed the tota b from	y and family size (urt) (the applicable eral income tax retal of the Average M Line a and enter the	this information is a family size consists of the family size consists of the family size consists of the family Payments for any the result in Line 25B. <b>Do</b>		
	<ul><li>a. IRS Housing and Utilities Standards; mortgage/re</li><li>b. Average Monthly Payment for any debts secured</li></ul>					\$	1,192.00		
		home, if any, as stated in L	ine 47	y you		\$	623.59		_
	l	Net mortgage/rental expen				Subtract Line b fr		\$	568.41
26	25B do Standa	Standards: housing and uppers not accurately compute and senter any additional artion in the space below:	the allowance to which	you a	re entit	ed under the IRS H	Iousing and Utilities	¢	0.00
	1							\$	0.0

Local Standards: transportation; vehicle operation/public transportation expenses. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7.   0   1   2   0 more.							
Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. □ □ □ □ 2 or more.  If you checked 0, or the read of the 2 or more, and the provided of the pr				expense allowance in this category regardless of whether you pay the			
If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation of the applicable number of vehicles in the applicable Meteropolitan Statistical Area or Census Region. (These amounts are available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  Local Standards: transportation and you contend that you are entitled to an additional deduction for your public transportation and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation ownership/lease expense; (You may not claim an ownership/lease expense) and two vehicles.)  Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  Local Standards: Transportation ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle 1. Subtract Line b from Line a.  Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 29. Do not enter an amount less than zero.  a. IRS Transportation ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b from Line a.  Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, a			ses or for which the operating expenses are				
Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  Local Standards: transportation; additional public transportation expenses. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the IRS Local Standards: Transportation ownership/lease expenses; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)			0 □ 1 ■ 2 or more.	included as a contribution to your household expenses in Line 7. $\square$ 0	27A		
Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation. (This amount is available at www.usdoj.gov/ust/ or from the tlRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)  Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) □ 1 ■ 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero.  Local Standards: transportation Standards, Ownership Costs			e "Operating Costs" amount from IRS Local	Transportation. If you checked 1 or 2 or more, enter on Line 27A the			
for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)  Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)    Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs \$ 496.00    A verage Monthly Payment for any debts secured by Vehicle   \$ 245.11    b. 1, as stated in Line 47  c. Net ownership/lease expense for Vehicle 1   Subtract Line b from Line a.  Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs   \$ 496.00    A verage Monthly Payment Standards, Ownership Costs   \$ 341.40    c. Net ownership/lease expense for Vehicle 2   Subtract Line b from Line a. \$ 341.40    c. Net ownership/lease expense for Vehicle 2   Subtract Line b from Line a. \$ \$ 34	424.00	\$	or from the clerk of the bankruptcy court.)	Census Region. (These amounts are available at www.usdoj.gov/ust/			
you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)      1	0.00	or	for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy				
(available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero.    a.   IRS Transportation Standards, Ownership Costs   \$ 496.00     Average Monthly Payment for any debts secured by Vehicle   \$ 245.11     c.   Net ownership/lease expense for Vehicle 1   Subtract Line b from Line a.    Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.   Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court): enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.   a.   IRS Transportation Standards, Ownership Costs   \$ 496.00     Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.   a.   IRS Transportation Standards, Ownership Costs   \$ 496.00     Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a.     341.40   2			rship/lease expense for more than two	you claim an ownership/lease expense. (You may not claim an ownersy vehicles.) ☐ 1 ■ 2 or more.			
Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 47 c. Net ownership/lease expense for Vehicle 1  Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs \$ 496.00 Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a.  30 Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  31 Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  32 Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  33 Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.			court); enter in Line b the total of the Averag	(available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 1, as stated in Li	28		
b.   1, as stated in Line 47   Subtract Line b from Line a.		0	\$ 496.00				
C.   Net ownership/lease expense for Vehicle 1   Subtract Line b from Line a.   \$		1	\$ 245.11				
the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs \$ 496.00   Average Monthly Payment for any debts secured by Vehicle   \$ 341.40   c. Net ownership/lease expense for Vehicle 2   Subtract Line b from Line a.  Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.	250.89	\$	Subtract Line b from Line a.				
Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2  Subtract Line b from Line a.   Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.			court); enter in Line b the total of the Averag	(available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 2, as stated in Li	20		
b.   2, as stated in Line 47   \$ Subtract Line b from Line a.		0	\$ 496.00		29		
C. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. \$  Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.		∸II			29		
state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  State, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  State, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. States are sales taxes.  State, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. States are sales taxes.  States, and local taxes, other taxes, social security taxes, self employment taxes, social security taxes, self employment taxes, social security taxes, and Medicare taxes. States are sales taxes.  States, and local taxes, other taxes, self employment taxes, social security and security taxes, social security are sales taxes.  States, and local taxes, other taxes, social security and security and metal average monthly deductions that are required to security and an analysis and an analysis are taxes.  States are taxes.  States are taxes.  States the total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  States are taxes.  States are	154.60	Ш	\$ 341.40	Average Monthly Payment for any debts secured by Vehicle	29		
deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. <b>Do not include discretionary amounts, such as voluntary 401(k) contributions.</b> Step 132  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. <b>Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.</b> Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. <b>Do not include payments on past due obligations included in line 49.</b> \$\$		0		b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	29		
life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  S  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.	1,284.90	<b>o</b> \$	Subtract Line b from Line a.  expense that you actually incur for all federal, acome taxes, self employment taxes, social	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2  Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as incention of the state and sales taxes.			
pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. <b>Do not</b> include payments on past due obligations included in line 49.	1,284.90 565.98	<b>9</b> \$	Subtract Line b from Line a.  expense that you actually incur for all federal, acome taxes, self employment taxes, social es taxes.  ent. Enter the total average monthly retirement contributions, union dues, and	Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2  Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as incessecurity taxes, and Medicare taxes. Do not include real estate or sales  Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory	30		
Other Negescary Evpenses, education for ampleyment or for a physically or mentally challenged shild. Enter	·	9 \$	Subtract Line b from Line a.  expense that you actually incur for all federal, acome taxes, self employment taxes, social es taxes.  ent. Enter the total average monthly retirement contributions, union dues, and antary 401(k) contributions.  enthly premiums that you actually pay for term	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47  c. Net ownership/lease expense for Vehicle 2  Other Necessary Expenses: taxes. Enter the total average monthly estate, and local taxes, other than real estate and sales taxes, such as insecurity taxes, and Medicare taxes. Do not include real estate or sale Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volunter Necessary Expenses: life insurance. Enter total average mon life insurance for yourself. Do not include premiums for insurance	30		
the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.	565.98	\$	Subtract Line b from Line a.  expense that you actually incur for all federal, acome taxes, self employment taxes, social es taxes.  ent. Enter the total average monthly retirement contributions, union dues, and antary 401(k) contributions.  enthly premiums that you actually pay for term to on your dependents, for whole life or for tall monthly amount that you are required to	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47  c. Net ownership/lease expense for Vehicle 2  Other Necessary Expenses: taxes. Enter the total average monthly estate, and local taxes, other than real estate and sales taxes, such as insecurity taxes, and Medicare taxes. Do not include real estate or sale Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volunties insurance for yourself. Do not include premiums for insurance any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total pay pursuant to the order of a court or administrative agency, such as	30 31 32		
	565.98	\$ \$ \$ \$ \$ \$	Subtract Line b from Line a.  expense that you actually incur for all federal, acome taxes, self employment taxes, social es taxes.  ent. Enter the total average monthly retirement contributions, union dues, and entary 401(k) contributions.  enthly premiums that you actually pay for term to nyour dependents, for whole life or for tall monthly amount that you are required to a spousal or child support payments. Do not entysically or mentally challenged child. Entertion that is a condition of employment and for	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47  c. Net ownership/lease expense for Vehicle 2  Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntifie insurance for yourself. Do not include premiums for insurance any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total average monthly payments on past due obligations included in line 49.  Other Necessary Expenses: education for employment or for a phythe total average monthly amount that you actually expend for educate education that is required for a physically or mentally challenged depotence.	30 31 32 33		

Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37    Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.   A	36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.	\$	0.00
Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37    Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.   a.   Health Insurance   S   988.68     b.   Disability Insurance   S   0.00     Total and enter on Line 39   S   988.68     If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:   S   Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.   S   0.00	37	actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and		100.00
Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.	38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$	6,689.21
the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.  a. Health Insurance		-		
b. Disability Insurance S 0.00  Total and enter on Line 39  If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  S  Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.  Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.  42  Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.  S  Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.  44  45  Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.  5  988.		the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your		
C.   Health Savings Account   \$ 0.00     Total and enter on Line 39   S 988.66     If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:   S   Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.   S 0.00	39			
Total and enter on Line 39  If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  \$  Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.  Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.  Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.  Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.  Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.  Charitabl				
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Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.  Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.  Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.  Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.  O.00	41	actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other		0.00
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expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.  Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.  \$ 0.00	43	actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and	\$	0.00
Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. \$ 0.00	44	expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is		0.00
	45	contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. §		0.00
	46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.	\$	988.68

			Subpart C: Deductions for De	ebt ]	Payment			
47	own, chec sche case,	, list the name of creditor, identify k whether the payment includes duled as contractually due to each	For each of your debts that is secure fy the property securing the debt, state taxes or insurance. The Average Mont the Secured Creditor in the 60 months for the additional entries on a separate page.	the A	Average Monthly Payment is the to wing the filing of	Payment, and tal of all amounts the bankruptcy		
		Name of Creditor	Property Securing the Debt		Average Monthly Payment	Does payment include taxes or insurance		
	a.	Car Connection Inc.	Automobile- 2006 Town & Country Minivan	\$		□yes ■no		
	b.	Nuvell	Truck- 2004 Chevrolet Silverado, 82,000 miles	\$	341.40	□yes ■no		
	c.	Vericrest Financial	Residence- 126 Hancock Avenue, Hamilton, Ohio, 45011 Residence- 126 Hancock	\$	242.00	□yes ■no		
	d.	Vericrest Financial	Avenue, Hamilton, Ohio, 45011	\$ T	<b>381.59</b> Ootal: Add Lines	□yes ■no	\$	1,210.10
48	your payn sums	or vehicle, or other property necedoduction 1/60th of any amount nents listed in Line 47, in order to s in default that must be paid in order	If any of debts listed in Line 47 are seesary for your support or the support of the "cure amount") that you must pay to maintain possession of the property. Order to avoid repossession or forecloss additional entries on a separate page.	of you the The	ur dependents, ye creditor in addit cure amount wo	ou may include in ion to the uld include any		
	a.	Name of Creditor -NONE-	Property Securing the Debt		\$	the Cure Amount		
49	prior		laims. Enter the total amount, divided by claims, for which you were liable at those set out in Line 33.		0, of all priority		\$	0.00
	Cha		s. Multiply the amount in Line a by the	e amo	ount in Line b, a	nd enter the	Ψ	
50	a. b.	issued by the Executive Officinformation is available at we the bankruptcy court.)	listrict as determined under schedules ce for United States Trustees. (This ww.usdoj.gov/ust/ or from the clerk of	X		4.70		
	c.	Average monthly administra	tive expense of chapter 13 case	To	otal: Multiply Li	nes a and b	\$	0.00
51	Tota	-	<b>t.</b> Enter the total of Lines 47 through 5				\$	1,210.10
1			Subpart D: Total Deductions	fron	n Income			·
52	Tota		Enter the total of Lines 38, 46, and				\$	8,887.99
1			NATION OF DISPOSABLE	INC	COME UNDI	ER § 1325(b)(2)	1	
53		d current monthly income. En		-		, , , , , , , , , , , , , , , , , , , ,	\$	8,799.84
54	payn	nents for a dependent child, repo	average of any child support payments orted in Part I, that you received in according to be expended for such child.				\$	0.00
55	wage		Enter the monthly total of (a) all amoun retirement plans, as specified in § 541( fied in § 362(b)(19).				\$	0.00
56	Tota	al of all deductions allowed und	ler § 707(b)(2). Enter the amount from	n Lin	e 52.		\$	8,887.99

57	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expense necessary and reasonable.				
	Nature of special circumstances	Amount of Expense			
	a.	\$			
	b.	\$			
	c.	\$			
		Total: Add Lines	\$	0.00	
58	<b>Total adjustments to determine disposable income.</b> Add the amounts on Lines 54, 55, 56, and 57 and enter the result.		nter the \$	8,887.99	
59	Monthly Disposable Income Under § 1325(b)(2). Subtr	act Line 58 from Line 53 and enter the result.	\$	-88.15	
	Port VI ADDITIO	ONAL EXPENSE CLAIMS	! <u>=</u>		
60	707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average each item. Total the expenses.    Expense Description   Monthly Amount			y expense for	
	Expense Description	Monthly			
00	lla l		Alliount		
00	a. b.	\$	Amount		
00	a. b. c.		Amount		
00	b. c. d.	\$ \$ \$ \$	Amount		
00	b. c. d.	\$ \$ \$	Amount		
00	b. c. d. Total: Add	\$ \$ \$ \$	Amount		
	b. c. d. Total: Add	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		both debtors	
	b. c. d. Total: Add  Part VI  I declare under penalty of perjury that the information pro-	\$ \$ \$ Lines a, b, c and d \$  I. VERIFICATION  vided in this statement is true and correct. (If the Signature: Is/ Gerald Smiley)		both debtors	
61	b. c. d. Total: Add  Part VI  I declare under penalty of perjury that the information promust sign.)	\$ \$ \$ Lines a, b, c and d \$  Lines a, b, c and d \$  Lines a, b, c and d \$  Since the statement is true and correct. (If the statement is true and correct.)		both debtors	
	b. c. d. Total: Add  Part VI  I declare under penalty of perjury that the information promust sign.)	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	is is a joint case,	both debtors	
	b. c. d.  Total: Add  Part VI  I declare under penalty of perjury that the information promust sign.)  Date: June 21, 2011	\$ \$ Lines a, b, c and d \$  Lines a, b, c and d \$  Lines a, b, c and d \$  Lines a, b, c and d \$  Lines a, b, c and d \$  Lines a, b, c and d \$  Lines a, b, c and d \$  Signature: Is/ Gerald Smiley Gerald Smiley (Debtor)	is is a joint case,	both debtors	

(Joint Debtor, if any)